

# Parent Referrals in CSA

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# Learning Objectives

1. Understand what constitutes a parent referral
2. Identify effective policies and procedures in managing parent referrals
3. Identify best practices for parent referrals

# What is a parent referral?

A parent referral is an inquiry for services, generally made by the parent or legal guardian directly to the CSA office



# And why do we accept them?



**Family  
Engagement**



# How do parents find out about CSA to make a parent referral?

Private Providers



Independent Research/Word of Mouth

Hospitals



Magellan  
HEALTHCARE<sup>SM</sup>

IACCT

# Core beliefs about children/families

- All families have strengths!
- Families are experts on themselves and are central to the CSA process
- Children are best served in their communities

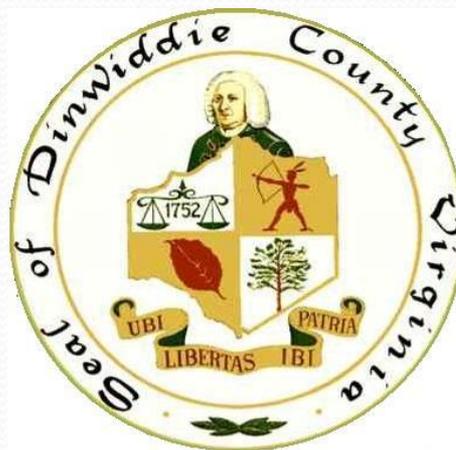
# Referral Process – Charlottesville

- CSA Coordinator serves as initial point of contact for parent referrals to CSA;
- During the initial contact, CSA Coordinator gathers information and triages case for possible CSA eligibility and current agency involvement;
- For families with no agency involvement, the CSA Coordinator helps the family connect with the CSB;
- The CSB works with the family to refer to community resources and/or services through CSA as appropriate;
- CSB case manager initiates CSA referral takes the case to FAPT to request services as needed.



# Referral Process – Dinwiddie County

- Parent completes a referral form and consent to exchange information
- Parent is responsible for obtaining documentation needed for the FAPT
- CSA Coordinator may work with family to refer to other community resources if child does not appear eligible for CSA
- Initial FAPT is presented by the family with CSA Coordinator support



# Referral Process – Newport News

- CSA Coordinator serves as Initial Point of Contact for parent referrals to CSA;
- During the initial contact, CSA Coordinator explores possible CSA eligibility and current city agency involvement;
- For families with no city agency involvement, the CSA Coordinator initiates a “warm transfer” to the CSB;
- CSB assesses and refers to FAPT, if necessary



# Best Practices – Case Triage

- The more you ask, the more you can help!
- You don't have to have all the solutions
- Getting people to the right place at the right time

“It was helpful to have someone asking questions and directing the conversation. It can be difficult to find words when questions or conversation is open-ended”



# Best Practices – Community Collaboration

- CSA is just one funding stream for access to services
- Partner agencies provide ongoing support
- Use your system of care network



“It’s helpful to have a ‘clearing house’ about services, even for things that are not paid for by CSA”

# Best Practices – “Warm Transfer”

- Many times, the family feels like they have already gotten the “run around”
- The unfamiliar is uncomfortable
- Provides a personable experience

“I appreciated having someone walk through the information and present the information on my family’s behalf”

“The transition to [the new case managing agency] was smooth”



**KEEP  
CALM  
AND  
WARM  
TRANSFER**

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**“Thank you for your patience. At this time, there are several calls waiting ahead of you. If people in your family tend to live a long time, please continue to hold.”**

# Best Practices – Family Engagement

- Begins with your first contact with a parent
- Don't just say family input is valued – show them!

“I felt like I was part of the team”

“The funding was important, but it was the work of the entire group that helped us so much”

“We love the CSA team because they are always available to answer questions and help when we really need it”

# Best Practices – Active Listening

- Don't make assumptions
- Be empathetic



“I was nervous about going to FAPT, but the team was personable. It wasn't just a team of professionals, and I felt that my opinion and input as the family was valued and the Team listened to my family's experience”

# Why Best Practices Matter

- Improved engagement with services
- Services provided in the least restrictive environment
- Shorter length of stay for out of home placements
- Impact on child-specific outcomes
- Improved practices over time based on experience

“ The customer’s perception  
is your reality ”

Kate Zabriskie

*“People will forget what you  
said, people will forget what  
you did,  
but people will never  
forget how you made  
them feel.”*

–Maya Angelou



- Everyone needs support
- Cases are managed through a team approach, not just one person/agency
- It may look like a simple case, but very rarely is
- Families relocate, so befriend your CSA neighbors!



- Always something new to learn from working with families
- Look for humor somewhere to relieve stress
- Parents WANT to trust the system!

# Building Bridges Initiative

“ It is becoming increasingly clear that family engagement is a key component not only of participation of care, but also in the effective implementation of it”



“Our job is not to cure kids but rather help kids and their families negotiate the basic tasks of everyday life”

# You may hear myths about families...and they may have some about us!



# Myths about families

- Parents just want their children out of their home
- Parents haven't tried to access services
- Parents wait until their children are in crisis mode before they care about getting help

# Myths about families, cont.

- Children are not eligible for CSA if they are not connected to a child-serving agency
- Having parent referrals will saturate my system
- Accepting parent referrals will bust our budget

# Myths about the system

- If I seek help, my child is going to enter foster care
- Services can begin immediately
- All children are eligible for services and funding
- Child can be “cured”
- I’ve tried everything and not received any assistance

So let's do a reframe!



**Myth**

**Myth-buster**

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**Myth**

**Myth-buster**

**Myth**

**Myth-buster**

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# Conclusion



It's about relationships and teamwork.

